

0488422

N/H ARREST / NOTICE TO APPEAR
2017079620

1513 JUVENILE

ADVISOR	OBTS Number	Agency ORI Number 0501700		Agency Name Jupiter Police Department	Agency Report Number (N.T.A.'s only) 5 4 17-002626	1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1			
CHARGE	Charge Type Check as many as apply	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other				If Weapon Seized Enter Type NONE		Multiple Citations Indicator			
LOCATION	Location of Arrest (Including Name of Business) 2999 MILITARY TRL/INDIAN CREEK PARKWAY				Location of Offense (Business Name, Address) 2999 MILITARY TRL/INDIAN CREEK PKWY, JUPITER, FL						
DEFENDANT	Date of Arrest 05/29/2017	Time of Arrest 02:49	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle				
IDENTIFICATION	Name (Last, First, Middle) WOODS, ELDRICK TIGER				Alias (Name, DOR, Sec. 4, Etc.) Alias:						
PHYSICAL	Race W - White B - Black	Sex M	Date of Birth 12/30/1975	Height 6'00	Weight 185	Eye Color BROWN	Hair Color BLACK	Complexion DARK	Build Medium		
RESIDENCE	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status D	Religion OTHER	Indication of Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>				
ADDRESS	Local Address (Street, Apt. Number)		(City)	(State)	(Zip)	Residence Type 1. City 3. Florida 2. County 4. Out of State 3					
CONTACT	Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation Athlete				
DRIVING	DL Number, State	Sec. Sec. Number	INS Number	Place of Birth (City, State) LONG BEACH, CA,		Citizenship US					
CO-DEFENDANT	Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile					
NOTICE	Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile					
PROPERTY	<input type="checkbox"/> Person <input type="checkbox"/> Other		Name (Last, First, Middle)		Residence Phone		Business Phone				
NOTICE	Address (Street, Apt. Number)		(City)	(State)	(Zip)	Notified by: (Name) _____ Date _____ Time _____ Released To: (Name) _____ Relationship _____ Date _____ Time _____					
NOTICE	The above address was provided by <input type="checkbox"/> defendant and/or <input type="checkbox"/> defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.		School Attended		Grade		Property Owned? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
CHARGE	Drug Activity	S. Sell	B. Smuggle	D. Dispense/Distribute	M. Manufacture/Produce/Cultivate	Z. Other	Drug Type	B. Barbiturate	H. Hallucinogen	P. Paraphernalia/Equipment	U. Unknown
CHARGE	DUI - DRIVING WHILE UNDER INFLUENCE						State Violation Number 316.193(1)	Violation of ORD #			
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond			
CHARGE							State Violation Number	Violation of ORD #			
CHARGE							State Violation Number	Violation of ORD #			
CHARGE							State Violation Number	Violation of ORD #			
INFORMATION	Health / Apparent Physical Condition of Defendant						Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries				
INFORMATION	Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Prepaid Bond <input type="checkbox"/> South County Mental Health						PROPERTY - Received By	Released By	Released To		
INFORMATION	Transported by						Dear Transported	Time Transported	Other		
NOTICE	<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.				Location (Court, Room) North County PALM BEACH GARD		Court Date and Time 07/05/2017 08:30:00		No Photo Available		
NOTICE	I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.										
NOTICE	Signature of Defendant (or Juvenile and Parent/Custodian)						Date Signed				
ADVISOR	HOLD for Other Agency		Signature of Arresting Officer 310 MAY 30 2017		Name Verification (Printed by Arrested)		#38				
ADVISOR	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suspected		<input type="checkbox"/> Released Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Printed) FANDREY, CHRISTOPHER ID # 1182		PAGE 1 of 1				
ADVISOR	Arresting Agency P/S Wellington 7111		Arresting Agency Fandrey 340 JPD		Date Signed NOV 29 AM 7:30		Witness here if subject is not present				

SCANNED

2017 MAY 30 AM 5:55

No Photo Available

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 29th DAY OF May 20 17, AT 0203 AM PM

SUBJECT: Eldrick Tiger Woods CASE NUMBER: 17-002626

AGENCY: JUPITER POLICE DEPARTMENT ARRESTING OFFICER: Ofc. C. Fandrey

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)
Ofc. Palladino #362 observed a black Mercedes bearing FL tag ECNY70 stopped in the roadway in the right lane. Ofc. Palladino made contact with the driver and sole occupant of the vehicle B/M Eldrick T. Woods (12/30/1975) who had his seat belt on and was seated in the drivers seat. It should be noted the Woods was asleep at the wheel and had to be woken up. The vehicle was running and brake lights were illuminated as well as the right blinker flashing.

See Ofc. Palladino #362 supplement for further.

OBSERVATION OF DRIVER:

Upon my arrival after speaking to officers on scene I made contact with the sole occupant of the vehicle who was later positively identified as B/M Eldrick T. Woods (12/30/1975) was seated in the driver seat of the vehicle. Woods had extremely slow and slurred speech.

DRIVER'S STATEMENTS:

Woods stated that he was coming from LA California from golfing. Woods stated that he did not know where he was. Woods had changed his story of where he was going and where he was coming from. Woods asked how far from his house he was. It should be noted that Woods was heading south bound away from Hobe Sound. Takes several prescriptions.

ODORS:

None

GENERAL OBSERVATIONS

SPEECH: Extremely slow and slurred, mumbled, confused

ATTITUDE: Cooperative, confused,

CLOTHING: White shirt, black shorts, black/white shoes

MEDICAL/OTHER: Stated takes several prescriptions.

STATE OF FLORIDA
COUNTY OF PALM BEACH

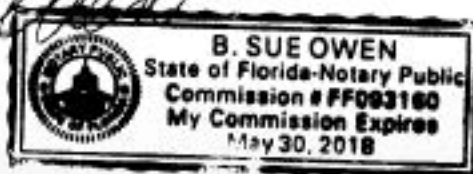
[Signature] 340
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 29th day of May 20 17 by Ofc. C. Fandrey

(Print name of Arresting/Investigative Officer), who is personally known to me or produced identification. Type of identification produced Personally Known

Sue Owen

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



SCANNED
MAY 30 2017

SUBJECT: Eldrick Tiger Woods

CASE NUMBER 17-002626

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

LT EYE-LACK OF SMOOTH PURSUIT

RT EYE-LACK OF SMOOTH PURSUIT

LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Did not follow stimulus and was not able to conduct HGN.

WALK & TURN

Could not maintain starting position. Missed heel to toe each time. Stepped off line several times. Used arms for balance. Did not return. Re explained instructions and again did not maintain starting position, stepped off line, used arms for balance, also stopped walking to steady self.

ONE LEG STAND:

Did not maintain starting position did not raise leg off the ground six inches, placed foot down several times

FINGER TO NOSE:

Did not maintain starting position, reexplained instructions multiple times to which he stated he understood, did not return arms to side after touching nose,

ROMBERG ALPHABET:

When asked if he understood directions he stated "yes, recite entire national anthem backwards". After several times of explaining instructions he completed the task correctly.

BREATH TEST RESULTS: .000 .000

STATE OF FLORIDA
COUNTY OF PALM BEACH

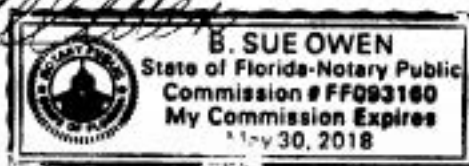
[Signature]
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 29th day of May 2017 by Ofc. C. Fandrey

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Personally Known

Sue Owen

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



SCANNED
MAY 30 2017

WITNESS LIST

CASE NUMBER: 17-002626

ARRESTING OFFICER: Ofc. C. Fandrey

ADDRESS: 210 Military Trail

PHONE NUMBERS (HOME): _____ (WORK) _____

CAN TESTIFY TO: See PC

NAME: Ofc. Palladino #362

ADDRESS: 210 Military Trail

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: Initial Contact

NAME: Sgt Hennesy #210

ADDRESS 210 Military Trail

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: On scene

NAME: Sgt. Alexandre #221

ADDRESS 210 Military Trail

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: On Scene

NAME: Ofc. Imperiale #382

ADDRESS 210 Military Trail

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: On scene

NAME: PFC A Borrows 380

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: DRE Evaluation

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

SCANNED

MAY 30 2017

TESTING FACILITY TASK REPORT

AGENCY: Jupiter P.D.
SUBJECT: Woods, Florick Tiger CASE NUMBER: 17-083484
DATE: 5/29/17 VIDEO TAPE NUMBER: 62714
BEGINNING TIME: 0422 ENDING TIME: 0434
BREATH TESTS RESULTS: 1) .000 TIME 0428 W/P.M. 2) .000 TIME 0431 W/P.M.
3) _____ TIME _____ A.M./P.M. 4) _____ TIME _____ A.M./P.M.

BREATH OPERATOR: S. Owen #3184
MAINTENANCE TECHNICIAN: J. Karlecki #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: slow, sluggish, very slurred
ATTITUDE: sluggish, sleepy, unable to walk alone
CLOTHING: black athletic shorts, white athletic shirt
MEDICAL CONDITIONS: goloxer, vicodin torix, viok (not taken this year)
MEDICATIONS: 4 left knee surgeries, 4 achilles
OTHER: Co-operative as much as possible very doopy
extremely sleepy hard to keep eyes open
hard to walk.

COMMENTS: A/O & A arrived at 0402 hrs
A/O observed 20 minutes
A/O requested breath test, A agreed
No problem with test, Tech explained results
A blew .0015 A/O requested urine, A agreed
A/O read C/W A understood rights
Refused Q&A Urine drawn at 0440 hrs
Off Borrows JPD did DRE

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MAY 30 2017

SUBJECT: _____ CASE NUMBER: _____

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.

-OR-

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances.

-OR-

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am _____ of the _____

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X) _____

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

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MAY 30 2017**

SUSPECT'S SIGNATURE: (X) _____

SUBJECT: _____ CASE NUMBER: _____

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE:

- EPILEPSY? _____
- GLASS EYE? _____
- FALSE TEETH? _____
- EAR INFECTION? _____
- INNER EAR TROUBLE? _____
- DIABETES? _____

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MAY 30 2017

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: _____



**ELDRICK TIGER
WOODS**



DOB: 01-21-1975 HGT: 6-80
WGT: 180

[Handwritten signature]

01-21-1975

Operation of a motor vehicle constitutes consent to any sobriety test required by law.

NOT A CERTIFIED COPY

SCANNED
MAY 30 2017



PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 17-083484 PBSO ZONE 1-14

AGENCY CASE # 17-002626 CRASH CASE # _____

TIME OF STOP/CRASH 0203 DATE 5/29/17 DAY Monday

SUBJECT'S NAME Eldrick Tiger Woods RACE Black SEX Male

HGT 6-00 WGT 185 DOB 12/30/1975

LOCATION Military Trail/Indian Creek Parkway

ARRESTING OFFICER'S NAME & ID C. Fandrey 340 AGENCY Jupiter PD

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 0402

BREATH RESULTS:

ARREST TIME 0249

1. .000

2. .000

3. _____

4. _____

TESTING OFFICER'S ID 3184 PBSO VIDEOTAPE # 02714

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MAY 30 2017